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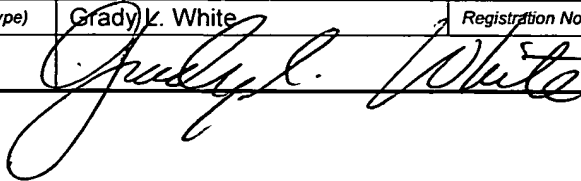
PTO/SB/05 (03-01)

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| <b>UTILITY<br/>PATENT APPLICATION<br/>TRANSMITTAL</b><br><br><i>(Only for new nonprovisional applications under 37 CFR 1.53(b))</i> | Attorney Docket No. 016762.501-US02 |   |
|   | First Inventor                      | Donald S. Curtis  |
|   | Title                               | CUSTOMER INFORMATION MANAGEMENT<br>INFRASTRUCTURE AND METHODS |
|   | Express Mail Label No.              |   |

J1132 U.S. PTO  
10/079017  
02/21/02

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| <b>APPLICATION ELEMENTS</b><br>See MPEP chapter 600 concerning utility patent application contents.  |   | <b>ADDRESS TO:</b> Box Patent Application<br>Commissioner for Patents<br>Washington, DC 20231   |                        |
| 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17)<br><i>(Submit an original, and a duplicate for fee processing)</i><br>2. <input type="checkbox"/> Applicant claims small entity status.<br>See 37 CFR 1.27.<br>3. <input checked="" type="checkbox"/> Specification [Total Pages 112]<br><i>(preferred arrangement set forth below)</i><br>- Descriptive title of the invention<br>- Cross Reference to Related Applications<br>- Statement Regarding Fed sponsored R & D<br>- Reference to sequence listing, a table,<br>or a computer program listing appendix<br>- Background of the Invention<br>- Brief Summary of the Invention<br>- Brief Description of the Drawings (if filed)<br>- Detailed Description<br>- Claim(s)<br>- Abstract of the Disclosure<br>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 35]<br>5. Oath or Declaration [Total Pages]<br>a. <input type="checkbox"/> Newly executed (original or copy)<br>b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d))<br><i>(for continuation/divisional with Box 18 completed)</i><br>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b><br>Signed statement attached deleting<br>inventor(s) named in the prior application,<br>see 37 CFR 1.63(d)(2) and 1.33(b).<br>6. <input checked="" type="checkbox"/> Application Data Sheet. See 37 CFR 1.76 |   | 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or<br>Computer Program (Appendix)<br>8. Nucleotide and/or Amino Acid Sequence Submission<br><i>(if applicable, all necessary)</i><br>a. <input type="checkbox"/> Computer Readable Form (CRF)<br>b. Specification Sequence Listing on:<br>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper<br>c. <input type="checkbox"/> Statements verifying identity of above copies  |                        |
| 18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application<br>Data Sheet under 37 CFR 1.76:<br><input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.:<br>Prior application information: Examiner Group / Art Unit:<br>For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied<br>under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by<br>reference. The Incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.   |   | <b>ACCOMPANYING APPLICATIONS PARTS</b><br>9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))<br>10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of<br><i>(when there is an assignee)</i> Attorney<br>11. <input type="checkbox"/> English Translation Document (if applicable)<br>12. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS<br>Statement (IDS)/PTO-1449 Citations<br>13. <input type="checkbox"/> Preliminary Amendment<br>14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)<br><i>(Should be specifically itemized)</i><br>15. <input type="checkbox"/> Certified Copy of Priority Document(s)<br><i>(if foreign priority is claimed)</i><br>16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).<br>Applicant must attach form PTO/SB/35 or its equivalent.<br>17. <input type="checkbox"/> Other: |                        |
| <b>19. CORRESPONDENCE ADDRESS</b><br><input checked="" type="checkbox"/> Customer Number or Bar Code Label 26853 or <input type="checkbox"/> Correspondence address below  |   |   |                        |
| Name   | COVINGTON & BURLING   |   |                        |
| Address  | 1201 Pennsylvania Avenue, NW  |   |                        |
| City   | Washington  | State   | D.C.                   |
| Country  | USA   | Telephone   | 202.662.6000           |
|  |   | Zip Code  | 20004-2401             |
|  |   | Fax   | 202.662.6291           |
| Name (Print/Type)  | Grady L. White  | Registration No. (Attorney/Agent)   | 40,874                 |
| Signature  |  |   | Date February 20, 2002 |

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| <h2 style="margin: 0;">FEE TRANSMITTAL</h2> <h3 style="margin: 0;">for FY 2002</h3> <p style="font-size: small; margin: 0;">Patent fees are subject to annual revision.</p> |  | <b>Complete if Known</b>            |                   |
| <input type="checkbox"/> Application claims small entity status. See 37 CFR 1.27  |  | Application Number                  | Not Yet Assigned  |
|   |  | Filing Date                         | February 21, 2002 |
|   |  | First Named Inventor                | Donald S. Curtis  |
|   |  | Examiner Name                       | Not Yet Assigned  |
|   |  | Group Art Unit                      | N/A               |
| <b>TOTAL AMOUNT OF PAYMENT</b> (\$) 12,876.00   |  | Attorney Docket No. 016762.501-US02 |                   |

| <b>METHOD OF PAYMENT (check all that apply)</b>   |          |              |          | <b>FEE CALCULATION (continued)</b>  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
|---|----------|--------------|----------|---|----------------|--------------|--------|-----------------|----------------|--------------|----------|-----------------|--------------------|----------|----------|----------|----------|--------------------|--------|--------|-----|-------------------------------------|-----|-------------------|----|-----|--------|---|--------|------------------|--|-----|-----|---------------------------|--------------|--------------------|--------------|-----|-----------------|--|----------|------------------------|----------|---------------------|------|--|-----|--------|------------------------|--|--------|---|-----|-----|-----------------------------------|-----|-----|--|-----|-----|---------------------------------------|-----|-----|---|-----|-----|--|-----|-----|--|-----|-----|--|-----|---------------------|---|--|-----|--------|-----------|-----|--|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|--------------------------|--|-----|-------|-----|-------|---|--|-----|-----|-----|----|----------------------------------|--|-----|-------|-----|-----|------------------------------------|--|-----|-------|-----|-----|--------------------------------|--|-----|-----|-----|-----|------------------|--|-----|-----|-----|-----|-----------------|--|-----|-----|-----|-----|-------------------------------|--|-----|----|-----|----|-------------------------------------|--|-----|-----|-----|-----|---|--|-----|----|-----|----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|--|--|-----|-----|-----|-----|---|--|-----|-----|-----|-----|---|--|
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input type="checkbox"/> Deposit Account<br>Deposit Account Number: 50-0740<br>Deposit Account Name: Covington & Burling<br>The Commissioner is hereby authorized to: (check all that apply)<br><input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input type="checkbox"/> Charge any additional fee(s) during the pendency of this application<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.   |          |              |          | <b>3. ADDITIONAL FEES</b>   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <b>1. BASIC FILING FEE</b>  |          |              |          | <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>112</td><td>920*</td><td>112</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>113</td><td>1,840*</td><td>113</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>117</td><td>920</td><td>217</td><td>460</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>118</td><td>1,440</td><td>218</td><td>720</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>128</td><td>1,960</td><td>228</td><td>980</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>119</td><td>320</td><td>219</td><td>160</td><td>Notice of Appeal</td><td></td></tr> <tr><td>120</td><td>320</td><td>220</td><td>160</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>121</td><td>280</td><td>221</td><td>140</td><td>Request for oral hearing</td><td></td></tr> <tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>141</td><td>1,280</td><td>241</td><td>640</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>142</td><td>1,280</td><td>242</td><td>640</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>143</td><td>460</td><td>243</td><td>230</td><td>Design issue fee</td><td></td></tr> <tr><td>144</td><td>620</td><td>244</td><td>310</td><td>Plant issue fee</td><td></td></tr> <tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>126</td><td>180</td><td>126</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>146</td><td>740</td><td>246</td><td>370</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>149</td><td>740</td><td>249</td><td>370</td><td>For each additional invention to be examined (37 CFR 1.129(h))</td><td></td></tr> <tr><td>179</td><td>740</td><td>279</td><td>370</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>169</td><td>900</td><td>169</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> </tbody> </table> |                |              |        | Large Entity    |                | Small Entity |          | Fee Description | Fee Paid           | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 105                | 130    | 205    | 65  | Surcharge - late filing fee or oath |     | 127               | 50 | 227 | 25     | Surcharge - late provisional filing fee or cover sheet. |        | 139              | 130  | 139 | 130 | Non-English specification |              | 147                | 2,520        | 147 | 2,520           | For filing a request for <i>ex parte</i> reexamination |          | 112                    | 920*     | 112                 | 920* | Requesting publication of SIR prior to Examiner action |     | 113    | 1,840*                 | 113  | 1,840* | Requesting publication of SIR after Examiner action |     | 115 | 110                               | 215 | 55  | Extension for reply within first month |     | 116 | 400                                   | 216 | 200 | Extension for reply within second month |     | 117 | 920  | 217 | 460 | Extension for reply within third month |     | 118 | 1,440  | 218 | 720                 | Extension for reply within fourth month |  | 128 | 1,960  | 228       | 980 | Extension for reply within fifth month |  | 119 | 320 | 219 | 160 | Notice of Appeal |  | 120 | 320 | 220 | 160 | Filing a brief in support of an appeal |  | 121 | 280 | 221 | 140 | Request for oral hearing |  | 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding |  | 140 | 110 | 240 | 55 | Petition to revive - unavoidable |  | 141 | 1,280 | 241 | 640 | Petition to revive - unintentional |  | 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) |  | 143 | 460 | 243 | 230 | Design issue fee |  | 144 | 620 | 244 | 310 | Plant issue fee |  | 122 | 130 | 122 | 130 | Petitions to the Commissioner |  | 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) |  | 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt |  | 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) |  | 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR 1.129(h)) |  | 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) |  | 169 | 900 | 169 | 900 | Request for expedited examination of a design application |  |
| Large Entity  |          | Small Entity |          | Fee Description   | Fee Paid       |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 105   | 130      | 205          | 65       | Surcharge - late filing fee or oath   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 127   | 50       | 227          | 25       | Surcharge - late provisional filing fee or cover sheet.   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 139   | 130      | 139          | 130      | Non-English specification   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 147   | 2,520    | 147          | 2,520    | For filing a request for <i>ex parte</i> reexamination  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 112   | 920*     | 112          | 920*     | Requesting publication of SIR prior to Examiner action  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 113   | 1,840*   | 113          | 1,840*   | Requesting publication of SIR after Examiner action   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 115   | 110      | 215          | 55       | Extension for reply within first month  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 116   | 400      | 216          | 200      | Extension for reply within second month   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 117   | 920      | 217          | 460      | Extension for reply within third month  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 118   | 1,440    | 218          | 720      | Extension for reply within fourth month   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 128   | 1,960    | 228          | 980      | Extension for reply within fifth month  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 119   | 320      | 219          | 160      | Notice of Appeal  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 120   | 320      | 220          | 160      | Filing a brief in support of an appeal  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 121   | 280      | 221          | 140      | Request for oral hearing  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 138   | 1,510    | 138          | 1,510    | Petition to institute a public use proceeding   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 140   | 110      | 240          | 55       | Petition to revive - unavoidable  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 141   | 1,280    | 241          | 640      | Petition to revive - unintentional  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 142   | 1,280    | 242          | 640      | Utility issue fee (or reissue)  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 143   | 460      | 243          | 230      | Design issue fee  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 144   | 620      | 244          | 310      | Plant issue fee   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 122   | 130      | 122          | 130      | Petitions to the Commissioner   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 123   | 50       | 123          | 50       | Processing fee under 37 CFR 1.17(q)   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 126   | 180      | 126          | 180      | Submission of Information Disclosure Stmt   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 581   | 40       | 581          | 40       | Recording each patent assignment per property (times number of properties)  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 146   | 740      | 246          | 370      | Filing a submission after final rejection (37 CFR 1.129(a))   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 149   | 740      | 249          | 370      | For each additional invention to be examined (37 CFR 1.129(h))  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 179   | 740      | 279          | 370      | Request for Continued Examination (RCE)   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 169   | 900      | 169          | 900      | Request for expedited examination of a design application   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>101</td><td>740</td><td>201</td><td>370</td><td>Utility filing fee</td><td>740.00</td></tr> <tr><td>106</td><td>330</td><td>206</td><td>165</td><td>Design filing fee</td><td></td></tr> <tr><td>107</td><td>510</td><td>207</td><td>255</td><td>Plant filing fee</td><td></td></tr> <tr><td>108</td><td>740</td><td>208</td><td>370</td><td>Reissue filing fee</td><td></td></tr> <tr><td>114</td><td>160</td><td>214</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td>( \$ )</td> <td>740.00</td> </tr> </tbody> </table> |          |              |          | Large Entity  |                | Small Entity |        | Fee Description | Fee Paid       | Fee Code     | Fee (\$) | Fee Code        | Fee (\$)           | 101      | 740      | 201      | 370      | Utility filing fee | 740.00 | 106    | 330 | 206                                 | 165 | Design filing fee |    | 107 | 510    | 207   | 255    | Plant filing fee |  | 108 | 740 | 208                       | 370          | Reissue filing fee |              | 114 | 160             | 214  | 80       | Provisional filing fee |          | <b>SUBTOTAL (1)</b> |      |  |     | ( \$ ) | 740.00                 | <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b> |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Large Entity  |          | Small Entity |          | Fee Description   | Fee Paid       |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 101   | 740      | 201          | 370      | Utility filing fee  | 740.00         |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 106   | 330      | 206          | 165      | Design filing fee   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 107   | 510      | 207          | 255      | Plant filing fee  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 108   | 740      | 208          | 370      | Reissue filing fee  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 114   | 160      | 214          | 80       | Provisional filing fee  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <b>SUBTOTAL (1)</b>   |          |              |          | ( \$ )  | 740.00         |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <tr> <td>Total Claims</td> <td>632</td> <td>-20** =</td> <td>612</td> <td>x</td> <td>Fee from below</td> <td>18.00</td> <td>=</td> <td>11,016.00</td> </tr> <tr> <td>Independent Claims</td> <td>13</td> <td>-3** =</td> <td>10</td> <td>x</td> <td>84.00</td> <td>=</td> <td>840.00</td> <td></td> </tr> <tr> <td>Multiple Dependent</td> <td></td> <td></td> <td></td> <td></td> <td>280.00</td> <td>=</td> <td>280.00</td> <td></td> </tr> </table>   |          |              |          | Total Claims  | 632            | -20** =      | 612    | x               | Fee from below | 18.00        | =        | 11,016.00       | Independent Claims | 13       | -3** =   | 10       | x        | 84.00              | =      | 840.00 |     | Multiple Dependent                  |     |                   |    |     | 280.00 | =   | 280.00 |                  | <table border="1" style="width: 100%; border-collapse: collapse; font-size: x-small;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>84</td><td>202</td><td>42</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>280</td><td>204</td><td>140</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>109</td><td>84</td><td>209</td><td>42</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td>( \$ )</td> <td>12,136.00</td> </tr> </tbody> </table> |     |     |                           | Large Entity |                    | Small Entity |     | Fee Description | Fee Paid   | Fee Code | Fee (\$)               | Fee Code | Fee (\$)            | 103  | 18   | 203 | 9      | Claims in excess of 20 |  | 102    | 84  | 202 | 42  | Independent claims in excess of 3 |     | 104 | 280                                    | 204 | 140 | Multiple dependent claim, if not paid |     | 109 | 84                                      | 209 | 42  | ** Reissue independent claims over original patent |     | 110 | 18                                     | 210 | 9   | ** Reissue claims in excess of 20 and over original patent |     | <b>SUBTOTAL (2)</b> |   |  |     | ( \$ ) | 12,136.00 |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Total Claims  | 632      | -20** =      | 612      | x   | Fee from below | 18.00        | =      | 11,016.00       |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Independent Claims  | 13       | -3** =       | 10       | x   | 84.00          | =            | 840.00 |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Multiple Dependent  |          |              |          |   | 280.00         | =            | 280.00 |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Large Entity  |          | Small Entity |          | Fee Description   | Fee Paid       |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| Fee Code  | Fee (\$) | Fee Code     | Fee (\$) |   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 103   | 18       | 203          | 9        | Claims in excess of 20  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 102   | 84       | 202          | 42       | Independent claims in excess of 3   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 104   | 280      | 204          | 140      | Multiple dependent claim, if not paid   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 109   | 84       | 209          | 42       | ** Reissue independent claims over original patent  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| 110   | 18       | 210          | 9        | ** Reissue claims in excess of 20 and over original patent  |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <b>SUBTOTAL (2)</b>   |          |              |          | ( \$ )  | 12,136.00      |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |
| <b>SUBTOTAL (3)</b> ( \$ ) 0.00   |          |              |          | Other fee (specify) _____   |                |              |        |                 |                |              |          |                 |                    |          |          |          |          |                    |        |        |     |                                     |     |                   |    |     |        |   |        |                  |  |     |     |                           |              |                    |              |     |                 |  |          |                        |          |                     |      |  |     |        |                        |  |        |   |     |     |                                   |     |     |  |     |     |                                       |     |     |   |     |     |  |     |     |  |     |     |  |     |                     |   |  |     |        |           |     |  |  |     |     |     |     |                  |  |     |     |     |     |  |  |     |     |     |     |                          |  |     |       |     |       |   |  |     |     |     |    |                                  |  |     |       |     |     |                                    |  |     |       |     |     |                                |  |     |     |     |     |                  |  |     |     |     |     |                 |  |     |     |     |     |                               |  |     |    |     |    |                                     |  |     |     |     |     |   |  |     |    |     |    |  |  |     |     |     |     |   |  |     |     |     |     |  |  |     |     |     |     |   |  |     |     |     |     |   |  |

|                                  |  |                                 |  |
|----------------------------------|--|---------------------------------|--|
| <b>SUBMITTED BY</b>              |  | <b>Complete (if applicable)</b> |  |
| Name (Print/Type) Grady L. White | Registration No. (Attorney/Agent) 40,874 | Telephone (202) 662-6000        |  |
| Signature                        |  | Date February 21, 2002          |  |

Docket No.: 016762.501-US02  
(PATENT)

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

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In re Patent Application of:  
Donald S. Curtis

Application No.: Not Yet Assigned

Group Art Unit: N/A

Filed: February 21, 2002

Examiner: Not Yet Assigned

For: CUSTOMER INFORMATION  
MANAGEMENT INFRASTRUCTURE AND  
METHODS

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**TRANSMITTAL LETTER**

**Box Application**  
Commissioner for Patents  
Washington, DC 20231

Dear Sir:

Enclosed are the following items for filing in connection with the above-referenced Patent Application:

1. Fee Transmittal;
2. Utility Patent Application Transmittal;
3. Application Data Sheet;
4. Utility application comprising: 55 pages of description; 56 pages of claims; a one page abstract; and 35 sheets of drawings (Figs. 1-3, 4A-4F, 5-9, 10A-10J, and 11-20;
5. Check No. 291703 for \$12,876.00 to cover:  
\$740.00 basic filing fee;  
\$12,136.00 additional claims fee; and

## 6. Two return receipt postcards.

The Commissioner is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 50-0740, under Docket No. 016762.501-US02. A duplicate copy of this paper is enclosed.

It is not believed that extensions of time or fees for net addition of claims are required beyond those that may otherwise be provided for in documents accompanying this paper. However, if additional extensions of time are necessary to prevent abandonment of this application, then such extensions of time are hereby petitioned under 37 C.F.R. § 1.136(a), and any fees required therefor (including fees for net addition of claims) are hereby authorized to be charged to our Deposit Account No. 50-0740.

Dated: February 21, 2002

Respectfully submitted,

By 

Grady L. White

Registration No.: 40,874

COVINGTON & BURLING

1201 Pennsylvania Avenue, N.W.

Washington, DC 20004-2401

(202) 662-6000